7.S Department of Labor Office of Labor-Management Standards Washington DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11-30-2006

This report is mandatory under P L. 86-257 as amended. Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



## READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 9038	2 Fiscal Year Covered From		
	1 / 1 / 2004 Through 12 / 31 / 2004		
3 Name and address of person filing	4 Name file number and address of labor organization		
Name Peter Youngcourt IV	Name Teamsters Local 688		
	Labor Organization File Number 025-471		
PO Box, Bidg Room No If any Ste 210	P O Box, Building and Room Number if any		
Street 300 S Grand Ave	Street 300 S Grand Ave		
Cnty St Louis	City St Louis		
State Missouri ZIP Code + 4 63103	State Missouri ZIP Code + 4 63103		
5 Position in labor organization Business Representative			
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent  6 Name and address of Employer (including trade name if any)  7.a Nature of Interest, Transaction or Income  Trade Name if any			
PO Box, Bldg Room No If any	7 b Amount.		
Street Crity ZIP Code + 4			
Signature			
15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete. (See the section on penalties in the instructions.)			
Signed Peter Myr III	On 08/12/2005 314-658-5741		
1	Date Telephone Number		

Name of Person Filing Peter Youngcourt IV	File Number U-		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested			
8 Name and address of Business (including trade name if any)	9 Business deals with		
Name Spector & Wolfe L L C	a Labor Organization		
Trade Name If any Attorney at Law	b Trust		
PO Box Bidg Room No If any Ste 101	c Employer		
Street 206 Argonne			
City Kirkwood			
State Missouri ZIP Code + 4 63122			
10 If 9 b or 9 c is checked give trust or employer's name.	11 a Nature of such dealing		
Name	Attorney provides legal services for Teamsters Local 688		
Trade Name if any			
P O Box, Bldg Room No. if any			
Street	11 b Approximate dollar value of such dealing	Fee FOR SERVICE	
City	12 a Nature of interest held or income received		
State ZiP Code + 4	Christmas Gift-One (1) box of Stea	ks	
	12 b Amount	\$48	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value			
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment		
Name			
Trade Name if any			
P O Box, 8kdg Room No if any			
Street			
Crty			
State ZIP Code + 4			
13 b Is the Business an Employer or Consultant 7	14 b Amount of payment		